

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET**
(FOR USE WITH FORM PTO-875)

SERIAL NO.

10/59/827

FILING DATE

02 MAY 2007

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1 st AMENDMENT		AFTER 2 nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	/		/			
2		/		/		
3		/		/		
4		3		/		
5		0		/		
6		0		/		
7		0		/		
8		0		/		
9		0		/		
10		0		/		
11		0		/		
12		0		/		
13		0		/		
14		0		/		
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17		/		/		
18	/		/			
19	/		/			
20		/		/		
21		/		/		
22		3		/		
23		0		0		
24		0		0		
25		0		0		
26		0		0		
27		0		0		
28		0		0		
29	/		/			
30	/		/			
31		/		/		
32		/		/		
33		3		/		
34		0		0		
35		0		0		
36		0		0		
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44		0		0		
45		0		0		
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47		0		0		
48						
49						
50						
TOTAL IND.	6	↓	6	↓		↓
TOTAL DEP.	47	←	61	←		←
TOTAL CLAIMS	53		67			

	AS FILED		AFTER 1 st AMENDMENT		AFTER 2 nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
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97						
98						
99						
100						
TOTAL IND.		↓		↓		↓
TOTAL DEP.		←		←		←
TOTAL CLAIMS						